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OMB APPROVAL

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FORM D

NOTICE OF SALE OF SECURITIES

PURSUANT TO REGULATION D,

PURSUAN

U	TFORM LIMITED OFFERING EXEM	PTION
Name of Offering ( check if this is an Issuance of \$1,000,000 in she	amendment and name has changed, and indicate change.) ares of Series A Preferred Stock	
Filing Under (Check box(es) that apply):  Type of Filing:     New Filing   An	Rule 504 Rule 505 Rule 506 Section 4(6)	. Oros
	A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about	the issuer	
Name of Issuer ( check if this is an am NativeEnergy, Inc.	endment and name has changed, and indicate change.)	
Address of Executive Offices  P.O. Box 539, 937 Perry Ro Address of Principal Business Operations (if different from Executive Offices)	Telephone Number (Including Ares Code) (802) 425-3418 Telephone Number (Including Area Code)	
Brief Description of Business Provide energy-related attributes	consulting services and purchase	and sell energy and energy
Type of Business Organization  X corporation business trust	limited partnership, already formed other (p	lease specify): PROCESSEI
Actual or Estimated Date of Incorporation of Jurisdiction of Incorporation or Organization	Month Year  ** Organization: [0.17] [0.12] [X] Actual [ Estinated	
GENERAL INSTRUCTIONS		MANCIAL

Todecal:

Who Maint File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230,501 et sen, or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of accurities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manualty signed copy or bear typed of printed signatures.

ation Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Officing Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal motice will not result in a loss of an available state exemption unless such exemption is predictated on the fliine of a federal notice.

	1 1 1	یب یا	A BASI	. l	ATA CONTACTA	150		鉴!	77 7	1, "(A)"
2. Enter the information re-	quested for the fol	lowing:				*1.IV_				ن <u>ر جسنیت ہے۔</u>
Each promoter of the	e issuer, if the iss	uer has	been organized wi	thin I	the past five years:					
Each beneficial own	er having the pow	er to va	te or disnose, or dir	ect th	e vote or disposition	of. 10	% or more o	f a clas	s of equity securities o	if the fissuer.
					rate general and mar					
Each general and m			_	•	•				, <b>,</b>	
Check Box(es) that Apply:	Promoter	X	Beneficial Owner	K	Executive Officer	Ø	Director		General and/or Monaging Partner	<del></del>
Full Name (Last name first, if	individual)		<del></del> -			·	<del>i</del>			
Boucher, Thomas	c.									
Business os Residence Addres	s (Number and	Street.	City, State, Zip Co	de)						
937 Ferry Road.	Charlotte	e, V	T 05445				·			
Check Box(es) that Apply:	Promoter	<b>x</b>	Beneficial Owner	X	Executive Officer	X	Director		General und/or Managing Partner	
Full Name (Last name first, if	individual)								<del></del>	
Stoddard, Thoma	s E.									
Business or Residence Addres	-		City, State, Zip Co	de)						
937 Ferry Road,	Charlotte	e, <b>V</b>	T 05445		<u> </u>		<u> </u>			
Check Box(es) that Apply:	Pramoter		Beneficial Owner	X	Executive Officer		Difector		General and/or Managing Partner	
Full Name (Last name first, if	individual)		<u> </u>				<del></del> .			
Kallock, William	m B.			_						
Business or Residence Addres		_	-	de)						
937 Ferry Road,	Charlotte	e, V	T 05445		<u> </u>		<u> </u>			
Check Box(es) that Apply;	Promoter		Beneficial Owner		Executive Officer	X	Director		General and/or Managing Partner	
Full Name (Last name first, if	Individual)									
Spears, Patrick	N.									
Business or Residence Addres	•		•	de)	- <del></del>					
937 Ferry Road,	Charlott	e, V	T 05445							
Check Box(es) that Apply:	Promoter	<b>X</b>	Icheficial Owner		Executive Officer	X	Director		General and/or Managing Partner	
Full Name (Last name first, if	individual)									·
Harris, Matthew							<u></u>			
Business or Residence Addres				de)					_	
937 Ferry Road,				-			·		<u> </u>	
Check Box(es) that Apply:	Promoter	<sup>ا</sup>	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner	
Full Name (Last name first, if	individual)	-					-		<del></del>	
Business or Residence Addres	s (Number and	Street,	City, State, Zip Co	đe)			14.4			<del></del>
Check Box(es) that Apply:	Promoter	□ E	Beneficial Owner		Executive Officer		Directos	D	General and/or Managing Pertner	<u> </u>
Full Name (Last name first, if	individual)		······	-					<del></del>	
Business or Residence Addres	s (Number and	Street,	City, State, Zip Co	de)				<del></del>		
	(Use blan	ık sheci	t, or copy and use a	dditi	onal copies of this sl	heet, o	s necessary	)		<del></del>

X.	* 5° 3	- A	ing and	M. T	1	INFORMATI	ÚN ABÓU	i offern	VG.		1	<b>刘鹏</b>	3, 3, 4
1.	Has the	issuer sold	l. or does	the issuer in	tend to	sell, to non-ac	credited i	avestars in	this offe	rîne?		Yes	No X
••		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,			in Appendix,					•	u	
2.	What is	the minim	um inves	iment that w	ill be ac	cepted from a	ny individ	lua!?			************	\$ 30.5	2
<b>3.</b>	Does th	e offering 1	pennit joi	nt ownership	of a si	ngle unit?	*********	.4.74.6.44.5	*********			Yes M	No □
4.	Enter the commission person states	ic informat sion or sim on to be lis 13 list the na	ion reque ilar remut ted is an a tme of the	sted for each teration for s ssociated per broker or de	n person olicitati ison or e aler. If	who has bee on of purchase gent of a brok more than five ation for that	n or will t ers in conn er or deale : (5) persor	oe paid or g ection with rregistered as to be liste	given, di Sales of s I with the ed are as:	rectly or indi ecurities in the SEC and/or	irectly, any ne offering with a state		
		Last name	lirst, if in	diviđual)									
N/ Bus		Residence	Address (	Number and	Street,	City, State, Z	ip Code)			<u></u>		<del></del> -	<del>_</del>
Nar	ne of Ass	sociated Br	oker or E	Dealer									
Sta						ds to Solicit I							_
	(Check	"All States	s" or chec	k individual	States)	*******************			##: = + <b>#</b> # = # + + + + + + + + + + + + + + + + +			□ VII	States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OII WV	GA MN OK WI	MS OR WY	MO PA PR
Ful	l Name (	Last name	fîr <del>st,</del> îf in	dividual)									
Bus	iness or	Residence	Address	(Number an	d Street	, City, State, 2	Lip Cade)						<del></del>
Na	ne of As:	ociated Br	oker or E	Pealer	<del></del> -	<del></del>		<u></u>	-	<del></del>	<del></del>	· –	<del></del> :
Sta	ics in Wi	ich Person	Listed I	las Salicited	or Inter	ids to Salicit I	Purchasers	·		<del></del>		<del></del> -	
	(Check	"All States	or chec	k individual	States)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	*************			gas \$44.00 bd , 6 44.00 bd 1 4 4 5	************		States
	AL IL MT RI	AK IN NE SC	AZ IA NY SD	AR KS NH ` TN	CA KY NJ TX	CO LA NM UT	ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Ful	l Name (	Last name	first; if in	dividual)		<del>-</del> - <del>-</del>				,	· · · · · · · · · · · · · · · · · · ·		
Bu	iness or	Residence	Address	(Number an	d Street	, City, State,	Cip Code)	_					
Na	me of As	sociated Bi	roker or I	Ocaler	_						<del>_</del>		
Sta	tes in Wi	ich Person	Listed I	las Solicited	or Inter	nds to Solicit	Purchasers	·	<del></del>			<u> </u>	
	(Check	"All State:	s" of chec	k individual	States)	.~~	*************	**************	************	, a	***************	All	States
	AL IL MT	AK IN NE SC	IA IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	C OFFERING PRICE WITHER OF INVESTORS EXPENSES AND USE OF P	ROCEEUS	it.
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this hox and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt		\$
	Equity	_	
	Common X Preferred		
	Convertible Securities (including warrants)		S
	Parinership Interests		
	Other (Specify)		
	Total		
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		<b>A</b>
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	2	\$1,000,000.00
	Non-accredited Investors	σ	\$0.00
	Total (for filings under Rule 504 only)	0	\$0
	Answer also in Appendix, Column 4, if filing under ULOE.		_
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505	•	\$
	Regulation A		\$
	Rute 504		S
	Total		20.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future confingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		<u> </u>
	Transfer Agent's Fees		<b>\$_</b>
	Printing and Engraving Costs		
	Legal Fees	_	
	Accounting Fees		
	Engineering Fees	_	
	Sales Commissions (specify finders' fees separately)	<b></b>	
	Other Expenses (identify) Advisory fees		
		K	

12	b. Enter the difference between the aggregate offering price given in response to Part C — Question I	OCCEDS F	2
	and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer."		\$ 928,600.00
5.	Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above.		
		Payments to Officers, Directors, & Affiliates	Payments. to Others
	Salaries and ices		
	Purchase of real estate	]\$	□ <b>5</b>
	Purchase, rental or leasing and installation of machinery		_
	and equipment		
	Construction of leasing of plant buildings and facilities	] \$	
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another		
	issuer pursuant to a merger)	)\$	□ s
	Repayment of indebtedness	] <b>\$</b>	s
	Working capital		
	Other (specify):	]\$	
		]\$	□s
	Column Totals	]\$ <u>0.00</u>	X 5 928,600.00
	Total Payments Listed (column totals added)	<b>y</b> 5_92	8,600.00
	The state of the s	100	TENERS . YES
sign	issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is nature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commiss information furnished by the issuer to any non-necredited investor pursuant to puragraph (b)(2) of Reference in the contract of the contra	s filed under Rù	le 505, the following
	er (Print or Type) Signature  Signature  D	ate 9/5/	07
	ne of Signer (Print or Type) Title of Signer (Print or Type)	<del>-//-/-</del>	
	omas E. Stoddard	ounsel	
	A 200 1 100 MILE GOILETAL C		

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	<b>北京</b>	F. G. E STATE SIGNATURE	到原
1.		30.262 presently subject to any of the disqualification Yes	No X
		See Appendix, Column 5, for state response.	
2.	The undersigned issuer hereby under D (17 CFR 239.500) at such times	rtakes to furnish to any state administrator of any state in which this notice is filed a noti as required by state law.	ce on Form
3.	The undersigned issuer hereby und issuer to offerees.	ertakes to furnish to the staté administrators, upon written request, information furni	shed by the
4,	limited Offering Exemption (ULOF	hat the issuer is familiar with the conditions that must be satisfied to be entitled to to ) of the state in which this notice is filed and understands that the issuer claiming the establishing that these conditions have been satisfied.	ne Uniform avaitability
	uer has read this notification and know thorized person.	the contents to be true and has duly caused this notice to be signed on its behalf by the u	ndersigned
Issuer (	Print or Type)	Signature Date	
Nati	veEnergy, Inc	/// Va / Galla/ 9/1/05	
Name (	Print or Type)	4 Tiple (Frint or Type)	

vice President and General Counsel

Thomas E. Stoddard

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

	*	1	产上部已	A. A.	RENDIX		يم لم		h u.
1	Intend to non-a investor	to sell coredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL	ļ <u> </u>								
AK								_	
AZ									
AR									
CA									
со									
СТ									
DE						<u> </u>			
DC									
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IA									
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KY									
LA									
ME									
MD									
MA		х	Series A Preferred	1.	\$650,000	0	\$0		ж
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MN									
MS		ļ							

APPENDIX A TO THE PROPERTY OF THE PARTY OF T											
1	Intend to non-a investor	2 to self ceredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)						
State	Yes	No		Number of Accredited Investors	Amoust	Number of Non-Accredited Investors	Amount	Yes	No		
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МТ											
NE											
NV											
NH											
נא											
NM											
NY											
NC	- · · · · · · · · · · · · · · · · · · ·										
ND											
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OR											
PA							_				
RJ											
sc	_										
SD											
TN											
ТХ											
IJΤ								Ţ			
TV		х	Series A Preferred	1	\$350,000.0	0	\$0		х		
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-	I 2 Intend to sell to non-accredited investors in State (Part B-Item 1)		Type of security and aggregate on-accredited offering price estors in State offered in state		Type of investor and amount purchased in State (Part C-Item 2)				
State:	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
PR									

END